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CONFIRMATION NO. 9124

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| RULE | | | | | | |
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| ** CONTINUING DATA ***** This application is a 371 of PCT/EP04/11983 10/22/2004 | | | | | | |
| ** FOREIGN APPLICATIONS ***** GERMANY 10349721.8 10/23/2003 | | | | | | |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/24/2007 | | | | | | |
| Foreign Priority claimed | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119(a-d) conditions met | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | GERMANY | 10 | 7 | 2 |
| Verified and Acknowledged | /JESSICA T STULTZ/ Examiner's Signature | Initials | | | | |
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| TITLE Individual Eyeglass Lens | | | | | | |
| FILING FEE RECEIVED 1030 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees | | |
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